

SECTION A – SERVICES/PRICES SCHEDULE

HELICOPTER RENTAL AGREEMENT

U.S. DEPARTMENT OF THE INTERIOR
Aviation Management Western Region
University Plaza Suite 300
960 Broadway Ave.
Boise, ID 83706



Flight Coordination Center (FCC) 208-334-9314 FAX: 208-334-9303

OAS VENDOR NO.: 80-ARA-

Name and Address:

Telephone No.:

After Hours:

FAX:

Email address:

A1. AIRCRAFT INFORMATION - (This form may be used for multiple helicopters (fleet) provided the prices and information are the same for each helicopter.)

FAA Reg. No.	N		N	
	N		N	

Manufacturer and Model:

Operations for Which Approved: [] VFR [] IFR

Passenger Seats Insured (exclude pilot):

Certified Under Part 133: [] YES [] NO

Vendor's Base of Operations:

Certified Under Part 137: [] YES [] NO

Special Equipment: ☐ High Skid Gear ☐ Pop-Out Floats ☐ Fixed Floats ☐ Intercom FM Programmable Radio (Narrow/Wide Band) ☐ GPS
 ☐ Helitorch ☐ Litter Kit ☐ Water Bucket ☐ Seeding/Fertilizer Bucket ☐ Cargo Hook ☐ Cargo Racks ☐
 ☐ Longline ☐ FLIR ☐ Other: _____

A2. RATES - PAYMENT COMPUTED IN ACCORDANCE WITH OAS-12

	WET WITH PILOT	DRY WITH PILOT	*WET WITHOUT PILOT	*DRY WITHOUT PILOT
(1) Rate Per Flight Hour	\$	\$	\$	\$

(2) Fuel Cost Used In Computing Wet Rates Offered Above: \$ Per Gallon. Fuel Consumption Rate: GPH

(3) Guarantee in Flight Hours Each Day Averaged over Period of Use (Subject to paragraph C8.2.3) HOURS

(4) Additional Amount Per Flight Hour when Copilot is Requested \$

(5) Extended Standby (Over 9 hours) - Pilot - \$ 45.00/hr /Fuel Servicing Vehicle Driver - \$27.00/hr (Extended Standby - see C8.3.3)

(6) Subsistence allowance for remaining overnight (RON) per authorized crewmember. Allowance paid per Federal Travel Regulations Per Diem Rates at <http://www.gsa.gov> (refer to paragraph C8.4.1).

(7) Reimbursement for Service Truck with Aircraft Fuel Carrying Capacity of:	0 Gallons to 349 Gallons 350 Gallons to 749 Gallons 750 Gallons to 1,499 Gallons 1500 Gallons or More	\$.95 PER MILE \$ 1.40 PER MILE \$ 2.00 PER MILE \$ 2.50 PER MILE
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* WITHOUT PILOT - Evidence of hull insurance to cover government pilots is required. (Refer to Clause C3.3) – Contact Flight Coordination Center

A3. TERMS AND CONDITIONS - The vendor agrees to perform services in accordance with the terms and conditions of this Aircraft Rental Agreement, which includes form OAS-12, and any applicable supplements, which are attached or incorporated herein by reference. This agreement is only applicable to transactions conducted through the Dept of Interior Aviation Management (DOI AM). The vendor certifies that the above identified aircraft are under Part 135 and that insurance coverage required under Clause C3.1 is in effect for all listed aircraft.

SIGNATURE OF VENDOR	NAME AND TITLE (Type or Print)	DATE
SIGNATURE OF CONTRACTING OFFICER	TITLE (Type or Print)	DATE